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CONFIRMATION NO. 8352

|  |   |                                    |   |  |                                |
|--|---|------------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/599,401   | <b>FILING or 371(c) DATE</b><br>02/27/2007<br><b>RULE</b>   | <b>CLASS</b><br>514                | <b>GROUP ART UNIT</b><br>1656   | <b>ATTORNEY DOCKET NO.</b><br>16785.10 |                                |
| <b>APPLICANTS</b><br>Seth Hallstrom, Wien, AUSTRIA;<br>Harald Gasser, Wien, AUSTRIA;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/AT05/00107 03/24/2005<br><b>** FOREIGN APPLICATIONS *****</b><br>AUSTRIA A 556/2004 03/29/2004<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>07/03/2007 |   |                                    |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/SAMUEL W LIU/</u><br>Examiner's Signature  | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR COUNTRY</b><br>AUSTRIA | <b>SHEETS DRAWINGS</b><br>8   | <b>TOTAL CLAIMS</b><br>18              | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>Workman Nydegger<br>1000 Eagle Gate Tower<br>60 East South Temple<br>Salt Lake City, UT 84111<br>UNITED STATES   |   |                                    |   |  |                                |
| <b>TITLE</b><br>Pharmaceutical Combined Preparation Containing a Therapeutic Protein   |   |                                    |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>1030   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |